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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/773,287	02/09/2004	Arto Palin	088245-1887	8738
23524 7590 09/15/2011 FOLEY & LARDNER LLP 150 EAST GILMAN STREET P.O. BOX 1497 MADISON, WI 53701-1497				
EXAMINER HUANG, WEIN WU				
ART UNIT 2618		PAPER NUMBER		
MAIL DATE 09/15/2011		DELIVERY MODE PAPER		

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.



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Board of Patent Appeals and Interferences

FOLEY & LARDNER LLP
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Appeal No: 2010-004613
 Appellant: Arto Palin, Jukka Reunamaki et al.
 Application No: 10/773,287
 Hearing Room: A
 Hearing Docket: B
 Hearing Date: Tuesday, October 04, 2011
 Hearing Time: 01:00 PM
 Location: Madison Building - East Wing
 600 Dulany Street, 9th Floor
 Alexandria, Virginia 22313-1450

**NOTICE OF HEARING
 CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquires, please contact the Clerk of the Board at 571-272-9797.

The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE: () HEARING ATTENDANCE CONFIRMED () HEARING ATTENDANCE WAIVED

 Signature of Attorney/Agent/Appellant

 Date

 Registration No.

Names of other visitors expected to accompany counsel: _____

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